## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

5584

## FORM C/OH COVER SHEET PG 1

			-	
The C/OH INSTRUCTION GUIDE explains how to complete this form.  1 ACCOUNT# (Ethics Commission filers)		2 -Total pages filed:		
3. CANDIDATE / OFFICEHOLDER	MSIMRS (MR) FIRST MICHAEL	(NONE)	OFFICE USE ONLY '	
NAME	NICKNAME LAST	SUFFIX	Date Received	
	"MIKE" SIMPSO,		FILED ZIIIL JA CO TRAVIS	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	11402 HUNTERS LANG	ITY STATE: 2:P CODE	Date Hand-delitared or Date Postmarked	
Change of Address	Austin, TX 78753		PM Final Fin	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER  (5/2) 837-0347	EXTENSION	Receipt # Amount	
6 CAMPAIGN TREASURER	MS/MRS/MR FIRST	MI	Date Processed	
NAME	Same NICKNAME LAST	SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET AODRESS (NO PO BOX PLEASE); APT / SUI	TE ≄; CITY: STATE:	ZIP CODE	
	Same		·	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER  ( ) Same	EXTENSION :		
9 REPORTTYPE	January 15 30th day before electron	n Runoff	15th day after campaign treasurer appointment (officeholder only)	
	July 15 8th day before election	Exceeded \$500 limit	Final report (A:lach C/OH - FR)	
10 PERIOD COVERED	Month: Day Year 7 / 1 / 2003 THROU	UGH /2 /3/ /	/2003	
11 ELECTION	ELECTION DATE ELECTION TYPE Munith Day Year			
	3/12/96 Primary		General Special	
12 OFFICE	OFFICE HELD (Hany) AT THE TIME, WAR CONSTABLE, PCT. 2, TRAVIS		VIS COUNTY	
14 NOTICE OF DIRECT CAMPAIGN	Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval.  Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure.			
EXPÉNDITURE BY OTHER INDIVIDUALS	Name 3		<del>:</del> .	
	Address / PO Box; Apt. / Suite #; City; State;	Z-p Code		
adciliona pages	w.			
GO TO PAGE 2				

## **CANDIDATE / OFFICEHOLDER REPORT:** SUPPORT & TOTALS

## FORM C/OH COVED SUBET DC 2

SUPPORT	& IOIAL	9	COVER SHEET PG Z	
15 C/OH NAME	AF-LI S	SIMPSOIN	16ACCOUNT #(Ethics Comm.ssionflers)	
17 NOTICE FROM POLITICAL	This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.			
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
-	SPECIFIC .	· N/4	<i>l</i>	
☐ add.t:onal pages		COMMITTEE CAMPAIGN TREASURER NAME		
:		COMMITTEE CAMPAIGN TREASURER ADDRESS	<u>-</u> ,	
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S. LOANS OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ -0-	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ -0-	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$ -0 -		1	
	4. TOTAL	POLITICAL EXPENDITURES	s - c -	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ -0-			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 47,600.00			
19 AFFIDAVIT				
SWENDOLYN POULLARD MY COMMISSION EXPIRES May 12, 2006  I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.				
Signature of Candidate or Officeholder  AFFIX NOTARY STAMP / SEAL ABOVE				
Sworn to and subscrib	oed before me, by	he said Michnel Simpscu	, this the 15th day	
of January, 20 54 ., to certify which, witness my hand and seal of office.				
Signature of officer administering oath  Printed name of officer administering oath  Title of officer administering oath				

